VZCZCXRO3277 OO RUEHCHI RUEHCN RUEHDT RUEHHM DE RUEHJA #1521/01 2541047 ZNR UUUUU ZZH O 111047Z SEP 09 FM AMEMBASSY JAKARTA TO RUEAUSA/DEPT OF HHS WASHINGTON DC IMMEDIATE RUEHC/SECSTATE WASHDC IMMEDIATE 3299 INFO RUEHZS/ASSOCIATION OF SOUTHEAST ASIAN NATIONS COLL RUCPDOC/DEPT OF COMMERCE WASHINGTON DC RUEHRC/USDA FAS WASHDC RUEATRS/DEPT OF TREASURY WASHINGTON DC RUEHKO/AMEMBASSY TOKYO 3075 RUEHBJ/AMEMBASSY BEIJING 5977 RUEHBY/AMEMBASSY CANBERRA 3653 RUEHUL/AMEMBASSY SEOUL 5406 RHEHNSC/NSC WASHDC

UNCLAS SECTION 01 OF 02 JAKARTA 001521

SIPDIS

FROM AMBASSADOR HUME TO SECRETARY SEBELIUS E.O. 12958: N/A

TAGS: EAGR EAID KGHG SENV PGOV ID

SUBJECT: Locking in Progress for Broader Health Cooperation in Indonesia

 $\P1$. (SBU) Your September 15 meeting with Health Minister Siti Fadillah Supari presents a critical opportunity to reset the stage for health and biomedical research cooperation with Indonesia. The

Susilo Bambang Yudhoyono Presidency received a resounding majority mandate in his July re-election, giving him more control of his next cabinet due for installation on October 20. Supari's recent incremental steps toward removing blockages to substantive health cooperation may be motivated by the uncertainty of her standing for the next cabinet. During your meeting, you will be asked to sign a joint statement outlining areas of US and Indonesian cooperation on health including the establishment of the Indonesia-U.S. Center for Biomedical and Public Health Research (IUC) to replace the US Naval Medical Research Laboratory No.2 (NAMRU-2). I believe you can obtain firm Government of Indonesia commitment to health cooperation that will be difficult to reverse in the next cabinet. Progress from First IUC Steering Committee

13. (SBU) Minister Supari chaired the first IUC Joint Steering Committee meeting on September 11, and tabled a draft IUC MOU text (e-mailed to HHS staff). We made substantial progress and reached agreement on a number of items, including:
A) Text of the Joint Statement to be released after your meeting

- (see para X);
- B) To continue work on the non-binding Health MOU as the indicator of both sides' political commitment to broad health cooperation;
- C) Public announcement of the IUC on November 1 instead of October 1 for purely political reasons surrounding the start date of President Yudhoyono's new government (there is no relation to MOH's commitment to launch the IUC on schedule);
- D) To the immediate establishment of a Joint Task Force that provides interim governance of the operations of the IUC.
- E) The agenda for the first Task Force meeting: to determine the specific activities to resume under the interim IUC banner, work on the draft IUC MOU text that Supari tabled, and decide the specifics for the November 1 announcement.

Steps to Build Momentum and Lock in Progress

 \P^4 . (SBU) Several outcomes of your meeting with Supari will go far in maintaining momentum on laying the foundations for broader health cooperation. First, you can confirm Supari's agreement to a "soft launch" of the IUC within the next few weeks and to the placement of new personnel to join the current NAMRU-2 staff to lead the transition. Your assurance to Supari that the USG remains committed to work toward a non-binding MOU (such as the one signed between the United States and Russia in July) as a marker of our two countries' political commitment to health cooperation will help maintain focus on the larger goal. We provided USG comments to the Indonesian draft MOU on September 10.

¶5. (SBU) In addition, anticipating successful conclusions of our current negotiations on the IUC and broader cooperation in health, I am requesting that you support the placement of a health attache in Indonesia. This position is needed to oversee the eventual IUC joint operation, as well as to advance cooperation on broader public health issues. Currently, the U.S. Government invests \$50-75 million per year through several different agencies and programs in Indonesia - there are seven sections or agencies at the Embassy working on health-related issues. I anticipate that this investment will increase in the next decade with the rising incidence of HIV, TB and other disease of global health importance. A health attache is needed to strengthen the overall relationship. $\P6$. (SBU) We have a unique opportunity at this moment of government transition in Indonesia to make significant progress on health issues. The Ministry of Health is more receptive to a long-term HHS presence in Indonesian than ever before. Locking in Indonesian agreement now for a long-term HHS presence, in my view, will solidify and anchor cooperation on public health cooperation through the current difficult time and for many years to come. Text of Joint Statement

 $\underline{\P}7.$ (SBU) The Joint Steering Committee agreed to the following text for forwarding to Washington for final approval. Begin text of Joint Statement.

Joint Statement by HHS Secretary Kathleen Sebelius and Indonesian Minister of Health Dr. Siti Fadilah Supari on Health Partnership U.S. Secretary of Health and Human Services Kathleen Sebelius met with the Honorable Siti Fadilah Supari, Ph.D., Minister of Health, Republic of Indonesia and her delegation today at the Department of Health and Human Services in Washington, D.C.

The U.S. Department of Health and Human Services and its

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11. (SBU) Your September 15 meeting with Health Minister Siti Fadillah Supari presents a critical opportunity to reset the stage for health and biomedical research cooperation with Indonesia. The Susilo Bambang Yudhoyono Presidency received a resounding majority mandate in his July re-election, giving him more control of his next cabinet due for installation on October 20. Supari's recent incremental steps toward removing blockages to substantive health cooperation may be motivated by the uncertainty of her standing for the next cabinet. During your meeting, you will be asked to sign a joint statement outlining areas of US and Indonesian cooperation on health including the establishment of the Indonesia-U.S. Center for Biomedical and Public Health Research (IUC) to replace the US Naval Medical Research Laboratory No.2 (NAMRU-2). I believe you can obtain firm Government of Indonesia commitment to health cooperation that will be difficult to reverse in the next cabinet. Progress from First IUC Steering Committee

counterparts in the Government of Indonesia plan to intensify health cooperation within the context of a comprehensive partnership between the United States and Indonesia. This renewed partnership may include fostering new scientific exchange and research activities. Our collaboration may focus on basic clinical and public health research and training programs. Both governments hope to improve and expand existing bilateral and regional biomedical and

public health research assets under joint civilian scientific leadership.

The meeting is a first step toward ministry-to-ministry collaboration as a critical tool for promoting scientific exchange, technology transfer, human resource development, intensified research and public health programs on diseases of global public health importance such as tuberculosis, malaria and influenza. In an important step toward achieving this goal, the two Governments agreed to establish a new Indonesia - United States Center for Biomedical and Public Health Research under joint civilian scientific leadership. Both Governments look forward to furthering their long and fruitful partnership by engaging in new and existing endeavors based on mutual respect and transparency. To further our partnership, both governments agree to hold an annual Senior Officials Meeting and pledge to hold ministerial consultations on a regular basis.

End text of Joint Statement.

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